FY 2011/2012 Accommodations Tax Funding Final Report You may record information directly on this form or create a separate document for more detailed responses.

I. PROJECT INFO: Organization Name:				
Project Name:				
Contact Name:	t Name: Phone:			
II. PROJECT COMPLETION:				
Were you able to complete the project as stated	in your original app	olication?		
If no, state any problems you encountered. —				
III. PROJECT SUCCESS: Please share any additional comments regarding encountered, etc.)				
IV. PROJECT ATTENDANCE: Record numbers in table below, as requested by reflect attendance and funds received for project	cts for current and pr			
Total budget of event/project			2011-2012	
Amount funded by A-tax				
Amount funded by A-tax from all sources				
Total attendance				
Total tourists*				
* Tourists are generally defined as those who travel project/event on a case by cases basis.	at least 50 miles to att	end; however,	the Committee considers every	
V. METHODS: Please describe the methods used to capture the atte	ndance data listed abo	ve (license plat	es, surveys, etc.)	
VI. PROJECT BUDGET: Attach report indicating project expenses of Accommodate and the second s	modations Tax FY11-	12 grant.		
VII. ORGANIZATION SIGNATURE: Provide signature of official within organization, ve	rifying accuracy of ab	ove statements.		
Name	Title			
Signature	Date			